City of Grand Rapids Telework Agreement

Employee Inform	nation		
Name:		Hire date:	
Job title:			
Department:			
FLSA status:	Exempt	Nonexempt	
Union Affiliation:			
Telework Inform	ation		
Planned start date:		Planned end date:	
Temporary work	location:		
Employee's Pri	mary Residence		
Flexible Location	ons		
Other			
Schedule Inform	nation		
Standard Work Schedule		Flexible schedule	
If "flexible" please	e note the arrangem	ent:	
Agreement By signing this agree	eement, the employee	agrees to the following:	
	The employee acknowledges receipt of the City of Grand Rapids Teleworking Policy and agrees		
2) The employ	unchanged, except those specifically addressed in the teleworking policy and/or this agreement. The employee agrees to comply with City of Grand Rapids' policies and expectations regarding		
3) The employ			
		ee will be expected to ensure the protection of proprietary on accessible from their home offices.	
4) The employ) The employee understands that management retains the right to modify or terminate this		
5) The employ	agreement on a temporary or permanent basis for any reason at any time. The employee agrees to return company equipment and documents within five days of the end telecommuting or termination of employment.		
Employee signatu	ure:	Date:	
Manager signature:		Date:	